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## \*BIBDATASHEET\*

CONFIRMATION NO. 1834

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/652,630	<b>FILING OR 371(c) DATE</b> 08/29/2003 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3736	<b>ATTORNEY DOCKET NO.</b> 13582.0002.NPUS00
<b>APPLICANTS</b> G. Frank Lawlis, Sanger, TX; T. Frank Lawlis, Pilot Point, TX;				
<b>** CONTINUING DATA *****</b> NO				
<b>** FOREIGN APPLICATIONS *****</b> NO				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY **</b> ** 11/20/2003				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature: <i>[Signature]</i> Initials:	<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 27
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> 22904				
<b>TITLE</b> Method and apparatus for acoustical stimulation of the brain				
<b>FILING FEE RECEIVED</b> 438	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	